



16638 U.S. PTO

101703

[+]

UTILITY PATENT APPLICATION TRANSMITTAL	Attorney Docket No. 1888646
	Inventor: Peter S. Duke, Mount Pleasant, Stoney Road, Kilcot, Newent, Gloucester, ENGLAND GL18-1PB
	Title: METHOD OF CONTROLLING A PERSON'S WEIGHT

To: Mail Stop Patent Application Commissioner for Patents P. O. Box 1450 Alexandria, Virginia 22313-1450	225B1 U.S. PTO 10/667007
---	-----------------------------

APPLICATION ELEMENTS	ACCOMPANYING APPLICATION PARTS
<input checked="" type="checkbox"/> Fee Transmittal Form PTO/SB/17 (In duplicate)	<input checked="" type="checkbox"/> Information Disclosure Statement, including Form PTO-1449 and copies of <u>5</u> references.
<input checked="" type="checkbox"/> Applicant claims small entity status.	<input checked="" type="checkbox"/> Check No. <u>1819</u> in the amount of \$ <u>385.00</u> .
<input checked="" type="checkbox"/> Specification and 9 Claims (36 pp.)	<input checked="" type="checkbox"/> Nonpublication Request Form PTO/SB/35
<input checked="" type="checkbox"/> Drawings, showing Figs. 1 and 2 (1 p.)	<input checked="" type="checkbox"/> Return Receipt Postcard.
<input checked="" type="checkbox"/> Combined Declaration and Power of Attorney.	

Customer Number is: 022824	
Correspondence Address is: Donald R. Schoonover 4211 Rolling Hills Drive Nixa, Missouri 65714-8771 USA	Telephone: (417)724-2188 Facsimile: (417)724-2469 Email: patentstms@aol.com

Name: Donald R. Schoonover	Attorney Registration No. 34,924
Signature: <i>Donald R. Schoonover</i>	Date: <i>October 13, 2003</i>

CERTIFICATE OF MAILING UNDER 37 C.F.R. § 1.8

I hereby certify that this correspondence is being deposited with the United States Postal Service as first class mail or priority mail in an envelope addressed to Mail Stop Patent Application, Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450

October 13, 2003.


Donald R. Schoonover
Donald R. Schoonover



101703

UTILITY FILING FEE TRANSMITTAL	Attorney Docket No. 1888646
	Inventor: Peter S. Duke
[X] Applicant claims small entity status.	Title: METHOD OF CONTROLLING A PERSON'S WEIGHT
Total Amount of Payment: \$ <u>385.00</u>	

METHOD OF PAYMENT	FEE CALCULATION (continued)																								
[X] Check No. <u>1819</u> The Commissioner is authorized to credit any overpayments or charge any additional fee(s) during the pendency of this application to Deposit Account No. 50-0961	2. EXTRA CLAIM FEES <table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 60%;"></td> <td style="text-align: right;"><u>Fee Paid</u></td> </tr> <tr> <td>Total Claims <u>9</u> - 20 = <u>0</u> X 9 = <u>0.00</u></td> <td></td> </tr> <tr> <td>Independent Claims <u>2</u> - 3 = <u>0</u> X 43 = <u>0.00</u></td> <td></td> </tr> </table> <table style="width: 100%; border-collapse: collapse;"> <tr> <th style="text-align: left;">Large Entity Small Entity</th> <th style="text-align: left;">Fee Description</th> </tr> <tr> <td style="text-align: center;"> <table style="width: 100%; border-collapse: collapse;"> <tr> <th style="text-align: center;">Fee Code</th> <th style="text-align: center;">Fee (\$)</th> <th style="text-align: center;">Fee Code</th> <th style="text-align: center;">Fee (\$)</th> </tr> <tr> <td style="text-align: center;">1201</td> <td style="text-align: center;">84</td> <td style="text-align: center;">2201</td> <td style="text-align: center;">43</td> </tr> <tr> <td style="text-align: center;">1202</td> <td style="text-align: center;">18</td> <td style="text-align: center;">2202</td> <td style="text-align: center;">9</td> </tr> </table> </td> <td> Independent claims in excess of 3 Claims in excess of 20 </td> </tr> </table> <div style="text-align: right;"> SUBTOTAL (2) \$ <u>0.00</u> </div>		<u>Fee Paid</u>	Total Claims <u>9</u> - 20 = <u>0</u> X 9 = <u>0.00</u>		Independent Claims <u>2</u> - 3 = <u>0</u> X 43 = <u>0.00</u>		Large Entity Small Entity	Fee Description	<table style="width: 100%; border-collapse: collapse;"> <tr> <th style="text-align: center;">Fee Code</th> <th style="text-align: center;">Fee (\$)</th> <th style="text-align: center;">Fee Code</th> <th style="text-align: center;">Fee (\$)</th> </tr> <tr> <td style="text-align: center;">1201</td> <td style="text-align: center;">84</td> <td style="text-align: center;">2201</td> <td style="text-align: center;">43</td> </tr> <tr> <td style="text-align: center;">1202</td> <td style="text-align: center;">18</td> <td style="text-align: center;">2202</td> <td style="text-align: center;">9</td> </tr> </table>	Fee Code	Fee (\$)	Fee Code	Fee (\$)	1201	84	2201	43	1202	18	2202	9	Independent claims in excess of 3 Claims in excess of 20		
	<u>Fee Paid</u>																								
Total Claims <u>9</u> - 20 = <u>0</u> X 9 = <u>0.00</u>																									
Independent Claims <u>2</u> - 3 = <u>0</u> X 43 = <u>0.00</u>																									
Large Entity Small Entity	Fee Description																								
<table style="width: 100%; border-collapse: collapse;"> <tr> <th style="text-align: center;">Fee Code</th> <th style="text-align: center;">Fee (\$)</th> <th style="text-align: center;">Fee Code</th> <th style="text-align: center;">Fee (\$)</th> </tr> <tr> <td style="text-align: center;">1201</td> <td style="text-align: center;">84</td> <td style="text-align: center;">2201</td> <td style="text-align: center;">43</td> </tr> <tr> <td style="text-align: center;">1202</td> <td style="text-align: center;">18</td> <td style="text-align: center;">2202</td> <td style="text-align: center;">9</td> </tr> </table>	Fee Code	Fee (\$)	Fee Code	Fee (\$)	1201	84	2201	43	1202	18	2202	9	Independent claims in excess of 3 Claims in excess of 20												
Fee Code	Fee (\$)	Fee Code	Fee (\$)																						
1201	84	2201	43																						
1202	18	2202	9																						
1. BASIC FILING FEE <table style="width: 100%; border-collapse: collapse;"> <tr> <th style="text-align: left;">Large Entity Small Entity</th> <th style="text-align: left;">Fee Description</th> <th style="text-align: left;">Fee Paid</th> </tr> <tr> <td style="text-align: center;"> <table style="width: 100%; border-collapse: collapse;"> <tr> <th style="text-align: center;">Fee Code</th> <th style="text-align: center;">Fee (\$)</th> <th style="text-align: center;">Fee Code</th> <th style="text-align: center;">Fee (\$)</th> </tr> <tr> <td style="text-align: center;">1001</td> <td style="text-align: center;">740</td> <td style="text-align: center;">2001</td> <td style="text-align: center;">385</td> </tr> </table> </td> <td>Utility Filing Fee</td> <td style="text-align: right;">\$ 385.00</td> </tr> </table> <div style="text-align: right;"> SUBTOTAL (1) \$ <u>385.00</u> </div>	Large Entity Small Entity	Fee Description	Fee Paid	<table style="width: 100%; border-collapse: collapse;"> <tr> <th style="text-align: center;">Fee Code</th> <th style="text-align: center;">Fee (\$)</th> <th style="text-align: center;">Fee Code</th> <th style="text-align: center;">Fee (\$)</th> </tr> <tr> <td style="text-align: center;">1001</td> <td style="text-align: center;">740</td> <td style="text-align: center;">2001</td> <td style="text-align: center;">385</td> </tr> </table>	Fee Code	Fee (\$)	Fee Code	Fee (\$)	1001	740	2001	385	Utility Filing Fee	\$ 385.00	3. ADDITIONAL FEES <table style="width: 100%; border-collapse: collapse;"> <tr> <th style="text-align: left;">Large Entity Small Entity</th> <th style="text-align: left;">Fee Description</th> <th style="text-align: left;">Fee Paid</th> </tr> <tr> <td style="text-align: center;"> <table style="width: 100%; border-collapse: collapse;"> <tr> <th style="text-align: center;">Fee Code</th> <th style="text-align: center;">Fee (\$)</th> <th style="text-align: center;">Fee Code</th> <th style="text-align: center;">Fee (\$)</th> </tr> </table> </td> <td>None.</td> <td></td> </tr> </table> <div style="text-align: right;"> SUBTOTAL (3) \$ <u>0.00</u> </div>	Large Entity Small Entity	Fee Description	Fee Paid	<table style="width: 100%; border-collapse: collapse;"> <tr> <th style="text-align: center;">Fee Code</th> <th style="text-align: center;">Fee (\$)</th> <th style="text-align: center;">Fee Code</th> <th style="text-align: center;">Fee (\$)</th> </tr> </table>	Fee Code	Fee (\$)	Fee Code	Fee (\$)	None.	
Large Entity Small Entity	Fee Description	Fee Paid																							
<table style="width: 100%; border-collapse: collapse;"> <tr> <th style="text-align: center;">Fee Code</th> <th style="text-align: center;">Fee (\$)</th> <th style="text-align: center;">Fee Code</th> <th style="text-align: center;">Fee (\$)</th> </tr> <tr> <td style="text-align: center;">1001</td> <td style="text-align: center;">740</td> <td style="text-align: center;">2001</td> <td style="text-align: center;">385</td> </tr> </table>	Fee Code	Fee (\$)	Fee Code	Fee (\$)	1001	740	2001	385	Utility Filing Fee	\$ 385.00															
Fee Code	Fee (\$)	Fee Code	Fee (\$)																						
1001	740	2001	385																						
Large Entity Small Entity	Fee Description	Fee Paid																							
<table style="width: 100%; border-collapse: collapse;"> <tr> <th style="text-align: center;">Fee Code</th> <th style="text-align: center;">Fee (\$)</th> <th style="text-align: center;">Fee Code</th> <th style="text-align: center;">Fee (\$)</th> </tr> </table>	Fee Code	Fee (\$)	Fee Code	Fee (\$)	None.																				
Fee Code	Fee (\$)	Fee Code	Fee (\$)																						

SUBMITTED BY:		
Name: Donald R. Schoonover	Reg. No. 34,924	Telephone: (417)724-2188
Signature: 	Date: <u>October 13, 2003</u>	

CERTIFICATE OF MAILING UNDER 37 C.F.R. § 1.8

I hereby certify that this correspondence is being deposited with the United States Postal Service as first class mail or priority mail in an envelope addressed to Mail Stop Patent Application, Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450 on

October 13, 2003.


Donald R. Schoonover

NONPUBLICATION REQUEST UNDER 35 U.S.C. § 122(b)(2)(B)(i)	First Named Inventor		Peter S. Duke
	Title	METHOD OF CONTROLLING A PERSON'S WEIGHT	
	Atty Docket Number		1888646

I hereby certify that the invention disclosed in the attached application **has not and will not be** the subject of an application filed in another country, or under a multilateral agreement, that requires publication at eighteen months after filing.

I hereby request that the attached application not be published under 35 U.S.C. § 122(b).

OCTOBER 1st 2003
Date

X P. S. Duke
Peter S. Duke

This request must be signed in compliance with 37 C.F.R. § 1.33(b) and submitted with the application **upon filing**.

Applicant may rescind this nonpublication request at any time. If applicant rescinds a request that an application not be published under 35 U.S.C. § 122(b), the application will be scheduled for publication at eighteen months from the earliest claimed filing date for which a benefit is claimed.

If applicant subsequently files an application directed to the invention disclosed in the attached application in another country, or under a multilateral international agreement, that requires publication of applications eighteen months after filing, the applicant **must** notify the United States Patent and Trademark Office of such filing within forty-five (45) days after the date of the filing of such foreign or international application. **Failure to do so will result in abandonment of this application (35 U.S.C. § 122(b)(2)(B)(iii)).**